

## Community Development Department - Zoning Division 2200 Civic Center Place, Miramar, Florida 33025 Tel: (954) 602-3264 Fax: (954) 602-3448

## **DRC/CAB REVISION COVERSHEET**

This sheet shall be completed and submitted in conjunction with any of the following: changes to the approved plans, and alterations, or anything not contained in the DRC/CAB-approved set. If the project already has a permit application on file, then this application must be approved prior to a building permit revision.

Fill out all requested information.	
	Date:
DRC / CAB Project #	Re. Permit No. BLD
Project Name	Your Name:
Project Address	Phone # ()
Lot: Block: Subdivision:	Fax # ()
Developer / Contractor:	
Email address:	
<ul> <li>AN INITIAL SUBMITTAL FEE OF SOF REVIEW.</li> <li>If approved, one set of plans</li> <li>Attach cover letter that desand why:</li> </ul>	d sets of scaled plans with revision clouds and dates.  75.00 PLUS 7% SURCHARGE = \$80.25 FOR THE FIRST HOUF will be returned to the Applicant with an approval stamp. scribes in detail what revisions are being submitted ate discipline to review your submittal.
Per Section 22-27.2 City of Miramar Co	ode of Ordinances, fees are to be collected for Plan Review.
Plan Review fee for all Revisions:	\$75.00 per hour plus 7% SUR-CHARGE - PER DISCIPLINE
□ <b>ZONING/CAB</b> \$Disapp.	Date
□ LANDSCAPING \$	
AppvdDisapp.	Date
Comments from the Plan Reviewer:	